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Substitute for Form PTO-875								Appl	ss it displays availd OMB control number Application or Docket Number		
APPLICATION AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY								OR	OR OTHER THAN		
_	FOR		NUMBER FILED		NUMBER EXTRA	7		٦	SMALL ENTITY		
• BA (37	 BASIC FEE (37 CFR 1.16(a), (b), or (c)) 				TOMBER EXTRA	RATE (\$)	FEE (\$)	4	RATE (\$)	FEE (\$)	
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(37 CFR 1.16(k), (i), or (m)) EXAMINATION FEE		m))	· · · · · · · · · · · · · · · · · · ·		<u> </u>	11					
(37 CFR 1.16(o), (p), or (q))		(p))						-			
TOTAL CLAIMS (37 CFR 1.16(i))						-		_	1.		
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(37 CFR 1.16(h))			minus 3 =			X		7 "	<u> </u>		
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MU	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							1			
. 14	APPLICATION AS AMENDED - PART II								TOTAL		
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))										
.•	If the entry in colu	ımn 1 is leec	than the enter	in call.	vrite "0" in column 3	TOTAL ADD'L FEE			TOTAL ADD'L FEE		
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The "Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.